

Natural Gas Well Completion Two Day Notification

E-mail to: DEPOilandGasSector@wv.gov

New Source Performance Standards for Crude Oil and Natural Gas Production,
Transmission and Distribution "NSPS 0000"

SECTION I: GENERAL INFORMATION

Chevron Appalachia, LLC

Owner or Operator Name

Division of Air Quality ID Number (If Available)

800 Mountain view Drive

Street Address

Smithfield

PA

15478

City

State

ZIP Code

Jenny Butenko

jbutenko@chevron.com

724.564.3755

Facility Local Contact Name

E-Mail

Telephone Number

Jenny Butenko

Signature

3.13.13

Date

SECTION II: SOURCE DESCRIPTION

1. Please check the proposed well flowback compliance option:

☐ Route flowback gas to a completion combustion device

☐ Use on-site as a fuel source;

☐ Reinject into the well or another well

☐ Route flowback gas to a salable gas pipeline

☐ Other _____

2. Please complete the table below for each affected source per §60.5365.

API Number	Farm Name and Well Number	Latitude & Longitude Coordinates	Planned date of the beginning of "Flowback"	Anticipated date of well completion
47-051-01388	Snyder # 1H	39° 56' 31.92" 80° 37' 41.80"	3.15.13	4.15.13

[Add rows to the table for additional wells, as necessary]